

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-873)**

FILE NO  
**10/519071**

FILED DATE  
**Winterhaven**  
Regional Stage Processing  
Patent Office  
(200) 575-8421

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		7				
TOTAL DEP.		0				
TOTAL CLAIMS		7				

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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